

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | J        |        | 07/23/01 |
| O.I.P.E. CLASSIFIER       |          | 10     | 7-31-01  |
| FORMALITY REVIEW          | H.T.     | 1117   | 8/29/01  |
| RESPONSE FORMALITY REVIEW |          |        |          |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date     |
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| Final    |          |
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| Claim    | Date |
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| Claim    | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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